

FT11000001651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2011 APR 15 PM 4:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED APR 15 2011

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Plains Radiology Services, PC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Janet Dwiggs

Name of Person

Plains Radiology Services, PC

Firm/Company

5308 Parklane Drive, Suite 4B, P.O. Box 2467

Address

Kearney, NE 68848-2467

City/State and Zip code

jdwiggs@gprnm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John R. Holdenried

Name of Person

at ( 402 ) 344-0500

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:



\$70.00 Filing Fee



\$78.75 Filing Fee &  
Certificate of Status



\$78.75 Filing Fee &  
Certified Copy



\$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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1. Plains Radiology Services, PC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Nebraska

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. October 1, 2008

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5308 Parklane Drive, Suite 4B, P.O. Box 2467, Kearney, NE 68848-2467

(Principal office address)

5308 Parklane Drive, Suite 4B, P.O. Box 2467, Kearney, NE 68848-2467

(Current mailing address)

8. Health care services

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

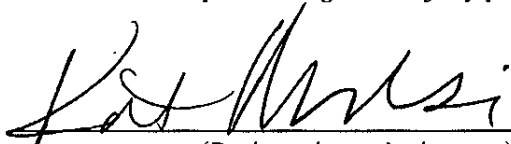
Plantation, Florida 33324

(City)

(Zip code)

10. **Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



(Registered agent's signature)

**Assistant Secretary  
Katie Markowski**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Jeffrey P. Lee

Address: 5308 Parklane Drive, Suite 4B, P.O. Box 2467  
Kearney, NE 68848-2467

Director: Rodney L. Johnson

Address: 5308 Parklane Drive, Suite 4B, P.O. Box 2467  
Kearney, NE 68848-2467

**B. OFFICERS**

President: Jeffrey P. Lee

Address: 5308 Parklane Drive, Suite 4B, P.O. Box 2467, Kearney, NE 68848-2467

Vice President: Rodney L. Johnson

Address: 5308 Parklane Drive, Suite 4B, P.O. Box 2467, Kearney, NE 68848-2467

Secretary: Rodney L. Johnson

Address: 5308 Parklane Drive, Suite 4B, P.O. Box 2467, Kearney, NE 68848-2467

Treasurer: Jeffrey P. Lee

Address: 5308 Parklane Drive, Suite 4B, P.O. Box 2467, Kearney, NE 68848-2467

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Jeffrey P. Lee, President, Treasurer, Director

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF

NEBRASKA

United States of America,  
State of Nebraska } ss.



Department of State  
Lincoln, Nebraska

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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I, John A. Gale, Secretary of State of Nebraska do hereby certify;

**PLAINS RADIOLOGY SERVICES, PC**

was duly incorporated under the laws of this state on October 1, 2008 and do further certify that no occupation taxes assessed are unpaid and no biennial reports are delinquent; articles of dissolution have not been filed and said corporation is in existence as of the date of this certificate.

In Testimony Whereof,

I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on April 7, 2011.

*John A. Gale*  
SECRETARY OF STATE



This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.